



Connecticut Coalition Against Domestic Violence

FTR

## Testimony in Support of

### SB 206, AA Authorizing Pregnancy as a Qualifying Event for Special Enrollment Periods for Certain Individuals

#### Committee on Insurance & Real Estate February 27, 2018

#### Member Organizations

The Umbrella Center for  
Domestic Violence Services  
Ansonia, CT

The Center for Family Justice  
Bridgeport, CT

Women's Center  
Danbury, CT

Domestic Violence Program  
United Services  
Dayville, CT

Network Against Domestic  
Abuse  
Enfield, CT

Domestic Abuse Services  
Greenwich YWCA  
Greenwich, CT

Interval House  
Hartford, CT

Chrysalis Domestic Violence  
Services  
Meriden, CT

Flow Horizons  
Middletown, CT

Prudence Crandall Center  
New Britain, CT

The Umbrella Center for  
Domestic Violence Services  
New Haven, CT

Safe Futures  
New London, CT

Domestic Violence Crisis Center  
Norwalk, CT

Women's Support Services  
Sharon, CT

Domestic Violence Crisis Center  
Stamford, CT

Susan B. Anthony Project  
Torrington, CT

Safe Haven  
Waterbury, CT

Domestic Violence Program  
United Services  
Willimantic, CT

Good afternoon Senator Larson, Senator Kelly, Representative Scanlon and members of the committee. CT Coalition Against Domestic Violence (CCADV), which is the state's leading voice for victims of domestic violence and those who serve them. Our members provide essential services to nearly 40,000 victims of domestic violence each year. Services provided include 24-hour crisis response, emergency shelter, safety planning, counseling, agency/staff training, support groups and court advocacy.

**We urge your support of SB 206 and respectfully urge your consideration of including *domestic violence* as a qualifying event for special enrollment periods.**

Healthcare is a critical component of addressing domestic violence. The emotional and physical impact of a controlling, emotionally and physically abusive relationship is challenging for victims. Anxiety, depression, diabetes, hypertension, sexually transmitted diseases, serious injury, and substance use, all of which have long-term physical and emotional repercussions, are all associated with domestic violence.

When able to access healthcare, health professionals play an important role in identifying and intervening in domestic violence as they often have trusted relationships with their patients. In fact, according to Futures Without Violence, a national leader on domestic violence and healthcare, victims are more likely to reach out to a healthcare provider before turning to the police or a domestic violence shelter. Women who talk to their healthcare provider about abuse are 2.6 times more likely to leave an abusive relationship, making healthcare providers vital front-line workers in identifying abuse and connecting women and children to help.

The Affordable Care Act (ACA) has established several provisions that benefit victims of domestic violence. Insurance companies are prohibited from denying coverage to victims of domestic violence as a preexisting condition and health plans are required to cover screening and counseling for domestic violence. Preventative screening and brief counseling for domestic violence do not require cost-sharing on the part of the patient, ensuring accessibility. The ACA also addresses Special Enrollment Periods for victims.

The potential lack of access to healthcare coverage is often an obstacle for victims, particularly victims with children, when considering leaving their abuser. Knowing that they or their children may no longer have access to healthcare can be the deciding factor between staying and leaving. Recognizing this, the Affordable Care Act has identified domestic violence as a qualifying life event to permit enrollment through the federal exchange at any time. Victims seeking insurance through these plans qualify for a Special Enrollment Period and do not need to wait for Open Enrollment.

Just as pregnancy should be a qualifying event for special enrollment periods in state-facilitated health plans, so should domestic violence, as both will promote accessibility to comprehensive healthcare coverage for women and children.

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Again, **we urge the General Assembly to mirror the federal benefit considering domestic violence a qualifying life event for Special Enrollment Periods in its state-facilitated plans** and ensure that victims do not have to make a choice about ending an abusive relationship based on the availability of healthcare coverage.

Thank you for your consideration. Please do not hesitate to contact me with questions.

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